

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 S. First St., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources

Form C-104  
Revised August 1, 2011

Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Submit one copy to appropriate District Office

☒ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address COG Operating LLC One Concho Center, 600 W. Illinois Ave. Midland, TX 79701		<sup>2</sup> OGRID Number 229137
		<sup>3</sup> Reason for Filing Code/ Effective Date Recomplete: 3/15/14
<sup>4</sup> API Number 30 - 015-37832	<sup>5</sup> Pool Name Brushy Draw; Delaware	
<sup>6</sup> Pool Code 8080		
<sup>7</sup> Property Code 308596	<sup>8</sup> Property Name Big Papi Federal Com	<sup>9</sup> Well Number 1H

II. <sup>10</sup> Surface Location

UL or lot no. B	Section 4	Township 26S	Range 29E	Lot Idn	Feet from the 330	North Line	Feet from the 1980	East line	County Eddy
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<sup>11</sup> Bottom Hole Location

UL or lot no. O	Section 4	Township 26S	Range 29E	Lot Idn	Feet from the 334	South line	Feet from the 1826	East line	County Eddy
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<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code P	<sup>14</sup> Gas Connection Date 3/15/14	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date
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III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
378421	Holly Refining & Marketing Company LLC PO BOX 159 Artesia, NM 88211-0159	O
241472	Southern Union Gas Services Ltd 301 Commerce Street, Ste 700 Fort Worth, TX 76102	G
<div>RECEIVED APR 28 2014 NMOCD ARTESIA</div>		

IV. Well Completion Data

<sup>21</sup> Spud Date 10/20/10	<sup>22</sup> Ready Date 3/15/14	<sup>23</sup> TD 11740'	<sup>24</sup> PBTD 6703'	<sup>25</sup> Perforations 6663'-6673'	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17 1/2"	13 3/8"	529'	500		
12 1/4"	9 5/8"	2850'	950		
7 7/8"	5 1/2"	11740'	1575		
	2 7/8" tbg	6476'	CIBP@ 6910'		

V. Well Test Data

<sup>31</sup> Date New Oil 3/19/14	<sup>32</sup> Gas Delivery Date 3/20/14	<sup>33</sup> Test Date 3/20/14	<sup>34</sup> Test Length 24	<sup>35</sup> Tbg. Pressure 70	<sup>36</sup> Csg. Pressure 70
<sup>37</sup> Choke Size	<sup>38</sup> Oil 33	<sup>39</sup> Water 268	<sup>40</sup> Gas 171		<sup>41</sup> Test Method P

<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Brian Maiorino*

Printed name:  
Brian Maiorino

Title:  
Regulatory Analyst

E-mail Address:  
bmaiorino@concho.com

Date: 4/16/14  
Phone: 432-221-0467

OIL CONSERVATION DIVISION

Approved by: *APDude*

Title: *District Supervisor*

Approval Date: *leave blank*

Pending BLM approvals will  
subsequently be reviewed  
and scanned

*3160-4  
3160-5*

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

## WELL COMPLETION OR RECOMPLETION REPORT

5. Lease Serial No.  
NMNM532311a. Type of Well ☒ Oil Well ☐ Gas Well ☐ Dry ☐ Other  
b. Type of Completion ☐ New Well ☐ Work Over ☐ Deepen ☐ Plug Back ☒ Diff. Resvr.  
Other \_\_\_\_\_

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

2. Name of Operator  
COG OPERATING LLCContact: BRIAN MAIORINO  
E-Mail: bmaiorino@concho.com8. Lease Name and Well No.  
BIG PAPI FEDERAL COM 1H3. Address ONE CONCHO CENTER 600 W. ILLINOIS AVE  
MIDLAND, TX 797013a. Phone No. (include area code)  
Ph: 432-221-04679. API Well No.  
30-015-37832

4. Location of Well (Report location clearly and in accordance with Federal requirements)\*

At surface NWNE 330FNL 1980FEL

At top prod interval reported below NWNE 330FNL 1980FEL

At total depth SWSE 334FSL 1826FEL

10. Field and Pool, or Exploratory  
BRUSHY DRAW, DELAWARE11. Sec., T., R., M., or Block and Survey  
or Area Sec 4 T26S R29E Mer12. County or Parish  
EDDY13. State  
NM14. Date Spudded  
10/20/201015. Date T.D. Reached  
11/13/201016. Date Completed  
☐ D & A ☒ Ready to Prod.  
03/15/201417. Elevations (DF, KB, RT, GL)\*  
2975 GL18. Total Depth: MD 11740  
TVD 738719. Plug Back T.D.: MD 6703  
TVD20. Depth Bridge Plug Set: MD 6910  
TVD

21. Type Electric &amp; Other Mechanical Logs Run (Submit copy of each)

22. Was well cored? ☒ No ☐ Yes (Submit analysis)  
Was DST run? ☒ No ☐ Yes (Submit analysis)  
Directional Survey? ☒ No ☐ Yes (Submit analysis)

## 23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 H40	48.0	0	529		500		0	
12.250	9.625 J55	36.0	0	2850		950		0	
7.875	5.500 N80	17.0	0	11740		1575		0	

## 24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	6476							

## 25. Producing Intervals

## 26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) DELAWARE	6663	6673	6663 TO 6673		40	OPEN
B)			7384 TO 11500		325	PLUGGED OFF
C)						
D)						

## 27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
6663 TO 6673	ACIDIZE W/1500 GAL 15%, FRAC W/6652 GAL GEL CARRYING 51020# SAND

## 28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
03/19/2014	03/20/2014	24	→	33.0	171.0	268.0	40.0		ELECTRIC PUMPING UNIT
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	70	70.0	→	33	171	268		POW	

## 28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #242981 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

## 28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

## 28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

29. Disposition of Gas(Sold, used for fuel, vented, etc.)  
CAPTURED

## 30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

## 31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
				RUSTLER SALT SALT BOTTOM DELAWARE BONE SPRING	746 930 2760 2955 6745

## 32. Additional remarks (include plugging procedure):

## 33. Circle enclosed attachments:

- |   |                    |               |                       |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.)     | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis   | 7. Other:     |                       |

## 34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

Electronic Submission #242981 Verified by the BLM Well Information System.  
For COG OPERATING LLC, sent to the Carlsbad

Name (please print) BRIAN MAIORINO

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 04/22/2014

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*5. Lease Serial No.  
NMNM53231

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator  
COG OPERATING LLCContact: BRIAN MAIORINO  
E-Mail: bmaiorino@concho.com8. Well Name and No.  
BIG PAPI FEDERAL COM 1H9. API Well No.  
30-015-378323a. Address  
ONE CONCHO CENTER 600 W. ILLINOIS AVE  
MIDLAND, TX 797013b. Phone No. (include area code)  
Ph: 432-221-046710. Field and Pool, or Exploratory  
BRUSHY DRAW; DELAWARE

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 4 T26S R29E NWNE 330FNL 1980FEL

11. County or Parish, and State

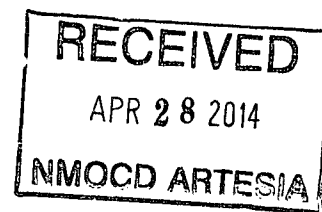
EDDY COUNTY, NM

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

2/13/14 MIRU, TOH rods and pump, NU BOP  
2/14/14 Set CIBP @6910', test csg to 5000#, test good  
2/18/14 dumped 50 sx cl H cmt on CIBP@6910'  
2/21/14 Tagged top of cmt @ 6703', perf Delaware 6663'-6673' w/40 shots, 4 spf  
2/22/14 acidize perms w/1500 gal 15%, frac w/6652 gal gel carrying 38,920# 20/40 brady + 12,100#  
20/40 siber prop  
3/12/14 rih with power swivel, clean sand out to pbtd @ 6703'  
3/13/14 RIH w/ 2-7/8"tbg, EOT @ 6476'  
3/15/14 RIH w/1-1/2"x26" pr, 2',4'1" subs, 57 1"N97 rods, 64 7/8" N97 rods, 119 3/4" N97 rods,  
2-1/2"x1-1/2"x24" RHBM-HVR, turned well over to production.



14. I hereby certify that the foregoing is true and correct.

Electronic Submission #243091 verified by the BLM Well Information System  
For COG OPERATING LLC, sent to the Carlsbad

Name (Printed/Typed) BRIAN MAIORINO

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 04/22/2014

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***